

**MULTIPLE DEPENDENT
FEE CALCULATIONS
(FOR USE WITH FORM PTO-279)**

APPLICANT(S)

09/693799

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEF.	IND.	DEF.	IND.	DEF.
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7	/					
8	/					
9		/				
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45						
46						
47						
48						
49						
50						
TOTAL IND.	2					
TOTAL DEF.	19					
TOTAL						

	IND.		DEF.		IND.		DEF.	
	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.
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